

**U.S. Department of Justice  
United States Marshals Service**

**PROCESS RECEIPT AND RETURN**

*See Instructions for "Service of Process by the U.S. Marshal"  
on the reverse of this form.*

**PLAINTIFF**

Timothy D. Kane

**DEFENDANT**

Gilbert, et al.

**COURT CASE NUMBER**

**07C6590**

**TYPE OF PROCESS**

**s/c**

**SERVE**



NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

**Deputy Joseph Paavilaien**

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

**AT**

**Lake County-Highway Patrol Division, 1301 N. Milwaukee Ave. Libertyville, IL 60048**

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:

Number of process to be served with this Form - 285

**Timothy Kane, B43676  
Stateville-STV  
Joliet, IL 60434**

Number of parties to be served in this case

Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):

Fold

**F I L E D**

DEC 20 2007 *fm* DEC 20 2007

MICHAEL W. DOBBINS

**CLERK U.S. DISTRICT COURT**

Signature of Attorney or other Originator requesting service on behalf of:

PLAINTIFF

TELEPHONE NUMBER

DATE

DEFENDANT

**12-04-07**

**SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE**

I acknowledge receipt for the total number of process indicated.  
(Sign only first USM 285 if more than one USM 285 is submitted)

Total Process  
**2 of 2**

District of Origin  
No. **24**

District to Serve  
No. **24**

Signature of Authorized USMS Deputy or Clerk

TD

Date

**12-04-07**

I hereby certify and return that  have personally served,  have legal evidence of service,  have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)

*C. McRae, Community Service Officer AIA*

Address (complete only if different than shown above)

A person of suitable age and discretion then residing in the defendant's usual place of abode.

Date of Service

Time

am

*12/14/07*

*3:00*

pm

Signature of U.S. Marshal or Deputy

*[Signature]*

Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
<b>One</b>	<b>Service fee charged same location + case</b>					

REMARKS:  
*See Attached Process Sheet #1  
for charges.*

*180 miles RT  
22 hrs.*